**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZA	TION		
1 Ottom 1	(See instructions	)		Office use only
NAME OF COMMITTEE (in f	ull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
Nebraska Leac	lership PAC			
ADDRESS (number and s	treet) PO Box 3325			
(Check if address is changed)				
	Omaha		NE L	68103
	C	CITY_	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-ma			
(Check if address is changed)	dianebrock1@cox.net			
(Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE 0,1	/ D D / Y Y Y Y Y Y Y Y		-	
3. FEC IDENTIFICA	TION NUMBER C	C00366419		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my knowle	edge and belief it is true, correct ar	nd complete	
Type or Print Name of	Freasurer Kim Robak			
Signature of Treasurer	Electronically Filed by Kim Robak		Date 03	28 2009
NOTE: Submission of fal	se, erroneous, or incomplete information may s			
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)